| Fill in this information to identify your case: | | |
|---|---------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF OHIO | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | | |
|-----|---|--|---|---|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Ashley First name L. Middle name | _ | First name Middle name |
| | Bring your picture | Hill | | Wilder Harrie |
| | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | _ | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, | Ashley Foster | | |
| | partnership, or LLC that is not filing this petition. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3587 | | |

Official Form 101

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Your Employer Identification Number (EIN), if any. | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 21270 Ellen Dr. Fairview Park, OH 44126 | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Cuyahoga | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| 0. | this district to file for | Check one. | Check one. |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| Deb | otor 1 Ashley L. Hill | | | | | Case numbe | er (if known) | |
|-----------|--|--------------|---------------|--|-----------------|------------------------|------------------------------|----------------------|
| Don | Tall the Court About | /a Damler | | | | | | |
| Par 7. | The chapter of the Bankruptcy Code you are | Check one | e. (For a bri | ef description of each, see | | | 342(b) for Individuals Filin | g for Bankruptcy |
| | choosing to file under | _ | ,, | o to the top of page 1 and | спеск ше аррі | opriate box. | | |
| | | ■ Chapte | | | | | | |
| | | ☐ Chapte | | | | | | |
| | | ☐ Chapte | | | | | | |
| | | ☐ Chapte | er 13 | | | | | |
| 8. | How you will pay the fee | abor orde | ut how you | entire fee when I file my p may pay. Typically, if you ttorney is submitting your p ddress. | are paying the | fee yourself, you m | nay pay with cash, cashier | 's check, or money |
| | | | | the fee in installments. If in Installments (Official Fo | | s option, sign and a | attach the Application for I | ndividuals to Pay |
| | | | U | my fee be waived (You m | , | s option only if you a | are filing for Chapter 7. By | law, a judge may, |
| | | appl | ies to your | red to, waive your fee, and family size and you are ur to Have the Chapter 7 Fili | able to pay the | e fee in installments | s). If you choose this optio | n, you must fill out |
| | | | | | | | | |
| 9. | Have you filed for bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes. | | | | | | |
| | | | District | | When | | Case number | |
| | | | District | | When | | _ Case number | |
| | | | District | | When | | _ Case number | |
| 10. | Are any bankruptcy | ■ No | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | | Relationship to you | |
| | | | District | | When | | Case number, if known | |
| | | | Debtor | | | | Relationship to you | |
| | | | District | | When | | Case number, if known | |
| 11. | Do you rent your | ■ No. | Go to lin | e 12. | | | | |
| | residence? | ☐ Yes. | Has you | r landlord obtained an evic | tion judgment a | against you? | | |
| | | | • | No. Go to line 12. | . • | - | | |

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

| Deb | otor 1 Ashley L. Hill | | | | Case number (if known) |
|-----|--|--|--|--|--|
| | | | | | |
| ar | Report About Any Bu | ısinesses | You Owi | n as a Sole Propriet | or |
| 2. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | e and location of busi | iness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numl | per, Street, City, State | e & ZIP Code |
| | it to this petition. | | Chec | k the appropriate box | x to describe your business: |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> debtor or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small</i> | proceed you are of cash-flow § 1116(1) ■ No. | under Su choosing v stateme)(B). I am | bchapter V so that it to proceed under Subent, and federal incomnot filing under Chapt | court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | Code | | 11, but I all NOT a small business debior according to the definition in the bank upicy |
| | | ☐ Yes. | | | 11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11. |
| | | ☐ Yes. | | | 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11. |
| ar | Report if You Own or | Have Any | y Hazard | ous Property or Any | Property That Needs Immediate Attention |
| 4. | Do you own or have any property that poses or is alleged to pose a threat of imminent and | ■ No. | What is | the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs | | | diate attention is | |
| | immediate attention? | | needed | , why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | |
| | | | | | Number, Street, City, State & Zip Code |
| | | | | | |
| | | | | | |

Debtor 1 Ashley L. Hill Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

| Deb | otor 1 Ashley L. Hill | | | | Case number | (if known) |
|-----|--|---|--|--------------|--|---|
| ar | t 6: Answer These Questi | ons for Re | porting Purposes | | | |
| 16. | What kind of debts do you have? | | Are your debts primarily of individual primarily for a pe | | | d in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | ■ Yes. Go to line 17. | | | |
| | | | | | debts? Business debts are debts the rthrough the operation of the busine | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you | owe that a | are not consumer debts or business | debts |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to | line 18. | |
| | Do you estimate that after any exempt property is excluded and | ■ Yes. | are paid that funds will be a | | stimate that after any exempt proper of distribute to unsecured creditors? | ty is excluded and administrative expenses |
| | administrative expenses are paid that funds will be available for distribution to unsecured creditors? | | ■ No □ Yes | | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-19 □ 200-99 | | | 1 1,000-5,000 1 5001-10,000 1 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 |
| 19. | How much do you estimate your assets to be worth? | \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | | \$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | | \$1,000,001 - \$10 million \$10,000,001 - \$50 million \$50,000,001 - \$100 million \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| ar | t7: Sign Below | | | | | |
| or | you | I have exa | amined this petition, and I de | eclare und | er penalty of perjury that the informa | tion provided is true and correct. |
| | | | | | vare that I may proceed, if eligible, ulable under each chapter, and I choo | nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7. |
| | | | | | r agree to pay someone who is not a required by 11 U.S.C. § 342(b). | an attorney to help me fill out this |
| | | I request i | relief in accordance with the | e chapter of | f title 11, United States Code, specif | ied in this petition. |
| | | bankrupto and 3571. | ey case can result in fines up | | | property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Ashley L Signature | | | Signature of Debtor 2 | 2 |
| | | Executed | on June 26, 2023 MM / DD / YYYY | | Executed on MM / | DD / YYYY |

| Debtor 1 | Ashley L. Hill | Case number (if known) | |
|----------|----------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Steven Emery | Date | June 26, 2023 |
|--|---------------|-------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Steven Emery | | |
| Printed name | | |
| Rauser & Associates | | |
| Firm name | | |
| 1468 W. 9th St. #300 | | |
| Cleveland, OH 44113 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 216-263-6200 | Email address | www.ohiolegalclinic.com |
| 0074676 OH | | |
| Bar number & State | | |

| Fill i | n this informa | tion to identify your | case: | | | |
|----------|----------------|---|---|---|---------------|----------------------------------|
| Debt | or 1 | Ashley L. Hill First Name | Middle Name | Last Name | | |
| Debt | or 2 | i iist ivaine | Wilddie Name | Lastivanie | | |
| (Spous | se if, filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States Bank | ruptcy Court for the: | NORTHERN DISTRIC | T OF OHIO | | |
| Case | number | | | | | |
| (if know | wn) | | | | _ | k if this is an |
| | · | | | | amen | ded filing |
| | | | | | | |
| | | <u>n 106Sum</u> | | | | |
| | | | | nd Certain Statistical Information | | 12/15 |
| | | | | e are filing together, both are equally responsible the information on this form. If you are filing amer | | |
| | | | | ck the box at the top of this page. | | • |
| Part | 1: Summar | ize Your Assets | | | | |
| | | | | | Your a | ıssets |
| | | | | | Value | of what you own |
| | | B: Property (Official Fo | | | \$ | 250,000.00 |
| | | | | | · | 200,000.00 |
| | 1b. Copy line | 62, Total personal pro | perty, from Schedule A/B. | | \$ | 34,877.33 |
| | 1c. Copy line | 63, Total of all property | on Schedule A/B | | \$ | 284,877.33 |
| Part | 2: Summar | ize Your Liabilities | | | | |
| I all | Z. Julilliai | ize rour Liabilities | | | | |
| | | | | | | i abilities nt you owe |
| 2. | Schedule D: (| Creditors Who Have C | aims Secured by Propert | ty (Official Form 106D) | | |
| | | | | t the bottom of the last page of Part 1 of Schedule D | . \$ | 193,566.78 |
| | | | Unsecured Claims (Officia | | • | 7 020 00 |
| | 3a. Copy the | total claims from Part | 1 (priority unsecured clair | ms) from line 6e of Schedule E/F | \$ | 7,939.00 |
| | 3b. Copy the | total claims from Part | 2 (nonpriority unsecured of | claims) from line 6j of Schedule E/F | \$ | 48,995.69 |
| | | | | | | |
| | | | | Your total liabilitie | s \$ | 250,501.47 |
| | | | | | | |
| Part | 3: Summar | ize Your Income and | Expenses | | | |
| | | our Income (Official Fo | | le I | \$ | 4,623.83 |
| | | our Expenses (Official on the contract of the | | | \$ | 4,838.80 |
| Part - | 4: Answer | These Questions for | Administrative and Stat | tistical Records | | |
| | | | | | | |
| 6. | - | | er Chapters 7, 11, or 13? on this part of the form. C | ? Check this box and submit this form to the court with y | our other sc | hedules. |
| | Yes | | | | | |
| 7. | What kind of | debt do you have? | | | | |
| | | | | | | |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,003.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|---|------------|----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 7,939.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 7,939.00 |

| Debtor 1 | Ashley L. Hi | iII | | | |
|--|---|------------------------|--|---|---|
| | First Name | | e Name Last Name | | |
| Debtor 2 Spouse, if filing) | First Name | Middle | Name Last Name | | |
| Jnited States B | Sankruptcy Court for | the: NORTHER | N DISTRICT OF OHIO | | |
| Case number | | | | | ☐ Check if this is a amended filling |
| Official Fo | orm 106A/E | 3 | | | |
| | le A/B: P | _ | | | 12/15 |
| ink it fits best. | Be as complete and ore space is needed, | accurate as possible | an asset only once. If an asset fits in more than or e. If two married people are filing together, both ar heet to this form. On the top of any additional page | e equally responsible for si | upplying correct |
| Part 1: Describe | e Each Residence, B | uilding, Land, or Otl | her Real Estate You Own or Have an Interest In | | |
| Do you own or | have any legal or ed | quitable interest in a | ny residence, building, land, or similar property? | | |
| □ No. Go to Pa | art 2. | | | | |
| Yes. Where | is the property? | | | | |
| | | | | | |
| | | | | | |
| .1 | | | What is the property? Check all that apply | | |
| .1 21270 El l | len Dr. | | What is the property? Check all that apply ■ Single-family home | Do not deduct secured cl | aims or exemptions. Put |
| 21270 EI | len Dr. s, if available, or other des | scription | | Do not deduct secured cl the amount of any secure Creditors Who Have Clai | ed claims on Schedule D: |
| 21270 Ell Street address | s, if available, or other des | | ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home | the amount of any secure Creditors Who Have Clair | ed claims on Schedule D: ms Secured by Property. Current value of the |
| 21270 EI | s, if available, or other des | 44126-0000 ZIP Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | the amount of any secure Creditors Who Have Clai | ed claims on Schedule D: ims Secured by Property. |
| 21270 Ell Street address | s, if available, or other des | 44126-0000 | ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y | ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? |
| 21270 Ell Street address | s, if available, or other des | 44126-0000 | ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y | ct claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$250,000.0 |
| 21270 Ell Street address | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. | ct claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$250,000.0 |
| 21270 Ell Street address Fairview City | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. | Current value of the portion you own? \$250,000.0 your ownership interest lancy by the entireties, c |
| Fairview City Cuyahog | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Fee simple Check if this is con (see instructions) | Current value of the portion you own? \$250,000.0 your ownership interest lancy by the entireties, c |
| Fairview City Cuyahog | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Fee simple Check if this is con (see instructions) | Current value of the portion you own? \$250,000.0 your ownership interest lancy by the entireties, c |
| Extreet address Fairview City Cuyahog | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Fee simple Check if this is con (see instructions) | Current value of the portion you own? \$250,000.0 your ownership interest lancy by the entireties, c |
| 21270 Ell Street address Fairview City Cuyahog | s, if available, or other des Park OH State | 44126-0000 | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: Debtor's Residence | the amount of any secure Creditors Who Have Clair Current value of the entire property? \$250,000.00 Describe the nature of y (such as fee simple, ter a life estate), if known. Fee simple Check if this is con (see instructions) | Current value of the portion you own? \$250,000.0 your ownership interest lancy by the entireties, c |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debtor 1 Ashley L. Hill | | Case number (if known) | |
|--|--|--|---|
| 3. Cars, vans, trucks, tractors, sport ut | ility vehicles, motorcycles | | |
| □No | | | |
| ■ Yes | | | |
| - res | | | |
| 3.1 Make: Dodge | Who has an interest in the preparty? Obeless | Do not deduct secured | I claims or exemptions. Put |
| A | Who has an interest in the property? Check one | the amount of any seco | ured claims on Schedule D: |
| Model: Avenger Year: 2013 | Debtor 1 only | | claims Secured by Property. |
| Approximate mileage: 165, | □ Debtor 2 only 000 □ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| Other information: | ☐ At least one of the debtors and another | oo p. opoy . | po you o |
| The unit has electrical issues | | | |
| has rattling noises, and need | | \$1,000.00 | \$1,000.00 |
| numerous repairs | (see instructions) | | |
| | | | |
| 3.2 Make: Ford | Who has an interest in the property? Check one | | I claims or exemptions. Put ured claims on Schedule D: |
| Model: Focus | Debtor 1 only | | claims Secured by Property. |
| Year: 2011 | Debtor 2 only | Current value of the | Current value of the |
| | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| Other information: The unit has significant rust | At least one of the debtors and another | | |
| The unit has significant rust | ☐ Check if this is community property | \$2,500.00 | \$2,500.00 |
| | (see instructions) | | |
| 5 Add the dollar value of the portion y | ou own for all of your entries from Part 2, including | g any entries for | #0.500.00 |
| | Write that number here | | \$3,500.00 |
| | | | |
| Part 3: Describe Your Personal and House | | | |
| Do you own or have any legal or equita | able interest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Household goods and furnishings Examples: Major appliances, furniture, No | , linens, china, kitchenware | | |
| Yes. Describe | | | |
| Househol | d Goods and Furnishings | | \$3,000.00 |
| including cell phones, came | dio, video, stereo, and digital equipment; computers, pr eras, media players, games | rinters, scanners; music colle | ctions; electronic devices |
| □ No | | | |
| Yes. Describe | | | |
| Call Phan | e, Computer, TVs, Tablet | | \$1,500.00 |
| Ceii Phon | e, computer, 1 vs, rablet | | φ1,300.00 |
| Collectibles of value Examples: Antiques and figurines; pair other collections, memorab | ntings, prints, or other artwork; books, pictures, or othe bilia, collectibles | r art objects; stamp, coin, or l | baseball card collections; |

■ No

page 2

Schedule A/B: Property

Official Form 106A/B

| De | ebtor 1 | Ashley L. Hi | Case number (if known) | |
|-----|---------------|---|---|--|
| | ☐ Yes. | Describe | | |
| | Example No | ent for sports ares: Sports, photo musical instru | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and | d kayaks; carpentry tools; |
| 10. | Firearn | ns | s, shotguns, ammunition, and related equipment | |
| | _ | Describe | | |
| | | | Smith & Wesson 9mm | \$200.00 |
| 11. | □ No | | othes, furs, leather coats, designer wear, shoes, accessories | |
| | | | Clothing | \$500.00 |
| 12. | □ No | | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, golo | d, silver |
| | | | Jewelry | \$200.00 |
| 13. | Examp □ No | rm animals oles: Dogs, cats, l | pirds, horses | |
| | | | 3 Dogs | \$0.00 |
| 14. | ■ No | her personal and | d household items you did not already list, including any health aids you did not list | |
| 15 | | | of all of your entries from Part 3, including any entries for pages you have attached number here | \$5,400.00 |
| | | scribe Your Finan | | |
| Do | you ow | vn or have any le | egal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | □ No Î | | nave in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | |
| | | | Cash on Hand | \$7.00 |
| | | | | |

| D | ebtor 1 Ashley L. Hil | l | | Case number (if known) | |
|-----|--|-------------|-------------------------|--|----------------|
| 17. | | | | counts; certificates of deposit; shares in credit unions, brokerage houses, and others with the same institution, list each. | er similar |
| | □ No ■ Yes | | | Institution name: | |
| | | 17.1. | Checking | Huntington National Bank | \$200.00 |
| | | 17.2. | Checking | Citizens Bank | \$30.00 |
| | | 17.3. | Savings | PSE Credit Union | \$5.00 |
| 18. | Bonds, mutual funds, of Examples: Bond funds, | | | rokerage firms, money market accounts | |
| | ■ No | | | • | |
| | ☐ Yes | | Institution or issue | r name: | |
| 19. | joint venture | ock and | interests in incor | porated and unincorporated businesses, including an interest in an LLC, pa | rtnership, and |
| | ■ No☐ Yes. Give specific info | ormation | about them | | |
| | Tes. Give specific fine | | me of entity: | % of ownership: | |
| 20. | Negotiable instruments | include ¡ | personal checks, ca | gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them. | |
| | ☐ Yes. Give specific info | | about them uer name: | | |
| 21. | Retirement or pension Examples: Interests in I No | | | 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| | Yes. List each accoun | • | tely. of account: | Institution name: | |
| | | Pens | sion | FERS, not currently drawing | Unknown |
| | | TSP | | Thrift Savings Plan | \$11,000.00 |
| 22. | | d deposi | ts you have made s | so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or others | |
| | ☐ Yes | | | Institution name or individual: | |
| 23. | Annuities (A contract fo | r a perio | dic payment of mor | ney to you, either for life or for a number of years) | |
| | Yes Iss | uer nam | ne and description. | | |
| | <u>N</u> a | ationwi | de | | \$12,000.00 |
| 24. | 26 U.S.C. §§ 530(b)(1), 5 | | | qualified ABLE program, or under a qualified state tuition program. | |
| | ■ No □ YesIns | stitution i | name and description | on. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| | | | | . , , | |

page 4

Schedule A/B: Property

Official Form 106A/B

| Debtor 1 | Ashley L. Hill | Case number (if known) | |
|---------------------|--|---|---|
| ■ No | s, equitable or future interests in property (other than anything | g listed in line 1), and rights or powers ex | ercisable for your benefit |
| <i>Exam</i> ■ No | hts, copyrights, trademarks, trade secrets, and other intellectumples: Internet domain names, websites, proceeds from royalties as Give specific information about them | | |
| <i>Exam</i> ■ No | ses, franchises, and other general intangibles inples: Building permits, exclusive licenses, cooperative association Give specific information about them | n holdings, liquor licenses, professional licen | ses |
| Money or | r property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | efunds owed to you Give specific information about them, including whether you alrea | ady filed the returns and the tax years | |
| <i>Exam</i> ■ No | y support nples: Past due or lump sum alimony, spousal support, child support. Give specific information | ort, maintenance, divorce settlement, propert | y settlement |
| Exam | amounts someone owes you nples: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else discourse disability benefits; unpaid loans you made to someone else | efits, sick pay, vacation pay, workers' compo | ensation, Social Security |
| 31. Intere | ests in insurance policies apples: Health, disability, or life insurance; health savings account (F | HSA); credit, homeowner's, or renter's insura | ance |
| | . Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| | Term Life Insurance through current employer. No cash value. | nt | \$0.00 |
| | American Income Life. I am the instend for this whole life insurance policy. | | \$2,375.19 |
| | American Income Life. My 20 year of son is the insured for this life insurance policy. | old Ashley Hill | \$150.03 |
| | American Income Life. My 17 year of daughter is the insured for this life insurance policy. | | \$62.54 |

| Debtor 1 Ashley L. H | Hill | Case number (if known) | |
|---|---|--|-----------------------|
| | American Income Life. My 11 year old daughter is the insured for this life insurance policy. | Ashley Hill | \$25.02 |
| | American Income Life. I am the insured for this whole life insurance policy. | Minor Daughters | \$122.55 |
| | erty that is due you from someone who has died ary of a living trust, expect proceeds from a life insurance information | policy, or are currently entitled to rec | eive property because |
| | parties, whether or not you have filed a lawsuit or made employment disputes, insurance claims, or rights to sue claim | de a demand for payment | |
| 34. Other contingent and ■ No □ Yes. Describe each | I unliquidated claims of every nature, including count | erclaims of the debtor and rights to | o set off claims |
| 35. Any financial assets ■ No □ Yes. Give specific in | | | |
| | e of all of your entries from Part 4, including any entric t number here | | \$25,977.33 |
| Part 5: Describe Any Busi | ness-Related Property You Own or Have an Interest In. List a | ny real estate in Part 1. | |
| 37. Do you own or have any ■ No. Go to Part 6. □ Yes. Go to line 38. | legal or equitable interest in any business-related property? | | |
| | - and Commercial Fishing-Related Property You Own or Have n interest in farmland, list it in Part 1. | an Interest In. | |
| 46. Do you own or have ■ No. Go to Part 7. □ Yes. Go to line 47. | any legal or equitable interest in any farm- or commer | cial fishing-related property? | |
| Part 7: Describe All F | roperty You Own or Have an Interest in That You Did Not List | Above | |
| | roperty of any kind you did not already list? kets, country club membership | | |
| ☐ Yes. Give specific in | formation | | |
| 54 Add the dollar value | of all of your entries from Part 7. Write that number h | nere | \$0.00 |

Debtor 1 Ashley L. Hill Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$250,000.00 56. Part 2: Total vehicles, line 5 \$3,500.00 57. Part 3: Total personal and household items, line 15 \$5,400.00 58. Part 4: Total financial assets, line 36 \$25,977.33 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$34,877.33 Copy personal property total \$34,877.33 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$284,877.33

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-----------|-----------------------|
| Debtor 1 | Ashley L. Hill | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

 Brief description of the property and line on Current value of the Amount of the exemption you claim

| Schedule A/B that lists this property | portion you own | | | |
|---|-------------------------------------|-----|---|---|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 21270 Ellen Dr. Fairview Park, OH 44126 Cuyahoga County | \$250,000.00 | • | \$161,375.00 | Ohio Rev. Code Ann. § 2329.66(A)(1) |
| Debtor's Residence PPN: 331-19-034 Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(1) |
| 2013 Dodge Avenger 165,000 miles The unit has electrical issues, has | \$1,000.00 | | \$1,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| rattling noises, and needs numerous repairs Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | 2329.00(A)(10) |
| 2011 Ford Focus 150000 miles The unit has significant rust | \$2,500.00 | | \$2,500.00 | Ohio Rev. Code Ann. § 2329.66(A)(2) |
| Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | 2020100(1.1)(2) |
| Household Goods and Furnishings Line from Schedule A/B: 6.1 | \$3,000.00 | | \$3,000.00 | Ohio Rev. Code Ann. § 2329.66(A)(4)(a) |
| | | | 100% of fair market value, up to any applicable statutory limit | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

Debtor 1 Ashley L. Hill Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cell Phone, Computer, TVs, Tablet Ohio Rev. Code Ann. § \$1,500.00 \$1,500.00 Line from Schedule A/B: 7.1 2329.66(A)(4)(a) 100% of fair market value, up to any applicable statutory limit Smith & Wesson 9mm Ohio Rev. Code Ann. § \$200.00 \$200.00 Line from Schedule A/B: 10.1 2329.66(A)(4)(a) 100% of fair market value, up to any applicable statutory limit Clothing Ohio Rev. Code Ann. § \$500.00 \$500.00 2329.66(A)(4)(a) Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Jewelry Ohio Rev. Code Ann. § \$200.00 \$200.00 Line from Schedule A/B: 12.1 2329.66(A)(4)(b) 100% of fair market value, up to any applicable statutory limit Cash on Hand Ohio Rev. Code Ann. § \$7.00 \$7.00 Line from Schedule A/B: 16.1 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Checking: Huntington National Bank Ohio Rev. Code Ann. § \$200.00 2329.66(A)(13) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Huntington National Bank** Ohio Rev. Code Ann. § \$200.00 \$50.00 Line from Schedule A/B: 17.1 2329.66(A)(3) П 100% of fair market value, up to any applicable statutory limit **Checking: Citizens Bank** Ohio Rev. Code Ann. § \$30.00 \$22.00 Line from Schedule A/B: 17.2 2329.66(A)(13) 100% of fair market value, up to any applicable statutory limit **Checking: Citizens Bank** Ohio Rev. Code Ann. § \$30.00 \$8.00 Line from Schedule A/B: 17.2 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit Savings: PSE Credit Union Ohio Rev. Code Ann. § \$5.00 \$5.00 2329.66(A)(3) Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit **TSP: Thrift Savings Plan** 11 U.S.C. § 522(b)(3)(C) \$11,000.00 \$11,000.00 Line from Schedule A/B: 21.2 100% of fair market value, up to

Official Form 106C

Schedule C: The Property You Claim as Exempt

any applicable statutory limit

| Del | btor 1 Ashley L. Hill | | | Case number (if known) | |
|-----|--|--------------------------------------|--------|---|--|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | American Income Life. I am the insured for this whole life insurance | \$2,375.19 | | \$2,375.19 | Ohio Rev. Code Ann. §§ 2329.66(A)(6)(b), 3911.10, |
| | policy. Beneficiary: Minor Daughters Line from Schedule A/B: 31.2 | | | 100% of fair market value, up to any applicable statutory limit | 3911.12, 3911.14 |
| | American Income Life. My 20 year old son is the insured for this life | \$150.03 | | \$150.03 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| | insurance policy. Beneficiary: Ashley Hill Line from Schedule A/B: 31.3 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(10) |
| | American Income Life. My 17 year old daughter is the insured for this life | \$62.54 | | \$62.54 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| | insurance policy. Beneficiary: Ashley Hill Line from Schedule A/B: 31.4 | | | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(10) |
| | American Income Life. My 11 year old daughter is the insured for this life | \$25.02 | | \$25.02 | Ohio Rev. Code Ann. § 2329.66(A)(18) |
| | insurance policy. Beneficiary: Ashley Hill Line from Schedule A/B: 31.5 | | | 100% of fair market value, up to any applicable statutory limit | 2329.00(A)(10) |
| 3. | Are you claiming a homestead exemption o (Subject to adjustment on 4/01/25 and every 3 No | | | led on or after the date of adjustmen | t.) |
| | Yes. Did you acquire the property covered | d by the exemption wi | thin 1 | ,215 days before you filed this case? | |
| | □ No □ Yes | | | | |
| | | | | | |

| | n this information to identify you | ır case: | | | | |
|---------------------------------------|---|---|---|---|--|--------------------------|
| Debt | tor 1 Ashley L. Hill | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debt | tor 2 se if, filing) First Name | Middle Name | Last Name | | | |
| | · · | | | | | |
| Unite | ed States Bankruptcy Court for the | NORTHERN DISTRICT OF OR | 110 | | | |
| Case | e number | | | | | |
| (if kno | ewn) | | | | ☐ Check | if this is an |
| | | | | | ameno | ded filing |
| Offi. | cial Form 106D | | | | | |
| | | NA (1) - 11 Ola la l | ^ | | | |
| Sci | nedule D: Creditors | Who Have Claims | Secured | by Propert | у | 12/15 |
| is nee numb 1. Do | eded, copy the Additional Page, fill it er (if known). any creditors have claims secured by | , , , , | to this form. On | the top of any addition | nal pages, write your na | |
| | _ | his form to the court with your other | schedules. Yo | u nave notning eise t | o report on this form. | |
| | Yes. Fill in all of the information | below. | | | | |
| Part | 1: List All Secured Claims | | | | | |
| | | more than one secured claim, list the cre | | Column A | Column B | Column C |
| | | s a particular claim, list the other creditor cal order according to the creditor's nam | | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 | Rocket Mortgage | Describe the property that secures | the claim: | \$193,566.78 | \$250,000.00 | \$0.00 |
| | Creditor's Name | 21270 Ellen Dr. Fairview Par 44126 Cuyahoga County Debtor's Residence PPN: 331-19-034 | | | | |
| | 1050 Woodward Ave. Detroit, MI 48226 | As of the date you file, the claim is: apply. | Check all that | | | |
| | Number, Street, City, State & Zip Code | ☐ Contingent☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| | owes the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Who | | | | | | |
| _ | ebtor 1 only | ■ An agreement you made (such as | mortgage or secu | ured | | |
| ■ D | ebtor 1 only ebtor 2 only | An agreement you made (such as car loan) | mortgage or secu | ured | | |
| ■ D | ebtor 2 only | car loan) | 0 0 | ured | | |
| ■ D □ D □ D | • | , , | 0 0 | ured | | |
| ■ D □ D □ A | ebtor 2 only ebtor 1 and Debtor 2 only | car loan) Statutory lien (such as tax lien, me | 0 0 | | | |
| D D D D D D D D D D D D D D D D D D D | ebtor 2 only ebtor 1 and Debtor 2 only t least one of the debtors and another heck if this claim relates to a | car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit | chanic's lien) First Mortga | | | |
| Date | ebtor 2 only lebtor 1 and Debtor 2 only t least one of the debtors and another check if this claim relates to a community debt debt was incurred 2022 | car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account num | chanic's lien) First Mortga ber 3541 | age | 20 70 | |
| Date | ebtor 2 only lebtor 1 and Debtor 2 only t least one of the debtors and another check if this claim relates to a community debt debt was incurred 2022 | car loan) Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset) | chanic's lien) First Mortga ber 3541 aber here: | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

| Fill in this infor | rmation to identify your case | : | | | | |
|---|--|--|---------------------------|---|---|-------------------------------|
| Debtor 1 | Ashley L. Hill | | | | | |
| | First Name | Middle Name Last Nar | ne | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name Last Nar | ne | | | |
| United States B | ankruptcy Court for the: NC | RTHERN DISTRICT OF OHIO | | | | |
| | | | | | | |
| Case number (if known) | | | | | ☐ Check | if this is an |
| | | | | | _ | ed filing |
| Official For | m 106F/F | | | | | |
| | | Have Unsecured Claim | าร | | | 12/15 |
| Schedule G: Exec Schedule D: Credi eft. Attach the Co name and case nu | eutory Contracts and Unexpired Litors Who Have Claims Secured ontinuation Page to this page. If yumber (if known). | could result in a claim. Also list execut eases (Official Form 106G). Do not inc by Property. If more space is needed, o you have no information to report in a F | lude any cr opy the Pa | editors with partially rt you need, fill it out, | secured claims that a number the entries i | re listed in the boxes on the |
| | All of Your PRIORITY Unsecu | | | | | |
| 1. Do any credit | tors have priority unsecured clai | ms against you? | | | | |
| Yes. | rail 2. | | | | | |
| | ur priority unsecured claims. If a | creditor has more than one priority unsec | ured claim | list the creditor separat | aly for each claim. For | each claim listed |
| possible, list the Part 1. If more | he claims in alphabetical order acc e than one creditor holds a particula | n priority and nonpriority amounts, list that ording to the creditor's name. If you have ar claim, list the other creditors in Part 3. e instructions for this form in the instructio | more than t | | laims, fill out the Conti | nuation Page of Nonpriority |
| 2.1 IRS | | Last 4 digits of account numbe | r 3587 | \$7,939.00 | amount \$7,939.00 | amount \$0.00 |
| Priority C | Creditor's Name | | | | Ψ1,000.00 | |
| _ | ox 7346 elphia, PA 19101-7346 | When was the debt incurred? | 2020 | | _ | |
| | Street City State Zip Code | As of the date you file, the clair | n is: Check | all that apply | | |
| _ | ed the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 | , | ☐ Unliquidated | | | | |
| Debtor 2 | only | ☐ Disputed | | | | |
| Debtor 1 | and Debtor 2 only | Type of PRIORITY unsecured c | laim: | | | |
| ☐ At least of | one of the debtors and another | ☐ Domestic support obligations | | | | |
| ☐ Check if | this claim is for a community d | | • | • | | |
| | subject to offset? | Claims for death or personal in | njury while y | ou were intoxicated | | |
| | | ☐ Other. Specify | | | | |
| ■ No | | | | | | |
| | | Income To | ax | | | |
| ■ No | | | ax | | | |
| ■ No □ Yes | All of Your NONPRIORITY Ur | Income To | ax | | | |
| No ☐ Yes | All of Your NONPRIORITY Ur tors have nonpriority unsecured | Income Tales | ax | | | |
| No Yes Part 2: List A | tors have nonpriority unsecured | Income Tales | | | | |
| No Yes Part 2: List A | tors have nonpriority unsecured | Income Talesecured Claims | | | | |

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

| Ashley L. Hill | | Case number (if known) | |
|---|--|---|-------------|
| Affirm, Inc. | Last 4 digits of account number | 3587 | \$797.00 |
| Nonpriority Creditor's Name 650 California St. Floor 12 San Francisco, CA 94108 | When was the debt incurred? | 2021 | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| Check if this claim is for a community debt | | aration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | | |
| ■ No | Debts to pension or profit-sharir | ng plans, and other similar debts | |
| Yes | Other. Specify Loan | | |
| Bridgecrest | Last 4 digits of account number | 3587 | \$9,019.00 |
| Nonpriority Creditor's Name P.O. Box 29018 Phoenix, AZ 85038 | When was the debt incurred? | 2020 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Auto Loan | Deficiency | |
| Capital One Auto Finance | Last 4 digits of account number | 3587 | \$13,000.00 |
| Nonpriority Creditor's Name P.O. Box 201347 | When was the debt incurred? | 2018 | |
| Arlington, TX 76006 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Auto Loan | Deficiency | |

| Ashley L. Hill | | Case number (if known) | |
|---|--|---|----------|
| Capital One Bank USA NA | Last 4 digits of account number | 3587 | \$585.00 |
| Nonpriority Creditor's Name P.O. Box 30293 Salt Lake City, UT 84131 | When was the debt incurred? | 2021 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| Yes | ■ Other. Specify Credit Card | <u> </u> | |
| City of Cleveland Division of Water | Last 4 digits of account number | 3587 | \$921.29 |
| Nonpriority Creditor's Name P.O. Box 94540 Cleveland, OH 44101-4540 | When was the debt incurred? | 2022-2023 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| □ Yes | Other. Specify Utility | | |
| City of Cleveland Parking Violations | Last 4 digits of account number | 3587 | \$100.00 |
| Nonpriority Creditor's Name | | | • |
| P.O. Box 99939 Cleveland, OH 44199 | When was the debt incurred? | 2021 | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | ng plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Parking Tic | kets | |

| Ashley L. Hill | Case number (if known) | | | | | |
|---|--|---|------------|--|--|--|
| City of East Cleveland | Last 4 digits of account number | 3587 | \$500.00 | | | |
| Nonpriority Creditor's Name Automated Traffic Control Violation Syst P.O. Box 22091 Tempe, AZ 85285 | When was the debt incurred? | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| □ Yes | Other. Specify Traffic Viola | ation | | | | |
| Comenity Bank/Express | Last 4 digits of account number | 3587 | \$575.00 | | | |
| Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218 | When was the debt incurred? | 2022 | | | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | |
| Who incurred the debt? Check one. | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | |
| No | Debts to pension or profit-sharin | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| ☐ Yes | Other. Specify Credit Card | | | | | |
| Comenity Bank/Victoria's Secret | Last 4 digits of account number | 3587 | \$1,300.00 | | | |
| Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218 | When was the debt incurred? | 2022 | | | | |
| Number Street City State Zip Code | As of the date you file, the claim i | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | • | | | | | |
| Debtor 1 only | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 2 only | | | | | | |
| Debtor 1 and Debtor 2 only | | | | | | |
| ☐ At least one of the debtors and another | | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card | | | | | |
| ■ No | | | | | | |
| — NO | | | | | | |

| Ashley L. Hill | Case number (if known) | | | | | | |
|---|---|------------|--|--|--|--|--|
| Discover Bank | Last 4 digits of account number 3587 | \$7,180.02 | | | | | |
| Nonpriority Creditor's Name P.O. Box 30923 Salt Lake City, UT 84130 | When was the debt incurred? 2021 | | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | | | | | | |
| At least one of the debtors and another | Student loans | | | | | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims | did not | | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| ☐ Yes | Other. Specify Credit Card | | | | | | |
| Dominion Energy Nonpriority Creditor's Name | Last 4 digits of account number 3587 | \$1,000.00 | | | | | |
| P.O. Box 26785 | When was the debt incurred? 2022-2023 | | | | | | |
| Richmond, VA 23261-6785 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| Who incurred the debt? Check one. | As of the date you me, the damins. Oneon an that apply | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| Check if this claim is for a community | ☐ Student loans | | | | | | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you or report as priority claims | lid not | | | | | |
| No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| ☐ Yes | ■ Other. Specify Utility | | | | | | |
| First Premier Bank | Last 4 digits of account number 3587 | \$654.00 | | | | | |
| Nonpriority Creditor's Name 3820 N. Louise Ave. | When was the debt incurred? 2021 | | | | | | |
| Sioux Falls, SD 57107 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | | |
| Who incurred the debt? Check one. | , | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims | ton bit | | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| □ Yes | ■ Other. Specify Credit Card | | | | | | |

| 1 Ashley L. Hill | Case number (if known) | |
|---|---|-----------|
| Midland Credit Management | Last 4 digits of account number 3587 | \$3,119.3 |
| Nonpriority Creditor's Name 350 Camino De La Reina Suite 100 | When was the debt incurred? | |
| San Diego, CA 92108 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims | i not |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify | |
| National Credit Adjusters | Last 4 digits of account number 3587 | \$241.0 |
| Nonpriority Creditor's Name 327 West 4th Street | When was the debt incurred? | |
| P.O. Box 3023 Hutchinson, KS 67504 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | Continuent | |
| Debtor 2 only | ☐ Contingent ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims | J not |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Debt Buyer Account | |
| Northern View Villas Apartments | Last 4 digits of account number 3587 | \$190.0 |
| Nonpriority Creditor's Name 4877 Columbia Rd # 50 North Olmsted. OH 44070 | When was the debt incurred? 2020 | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community debt | ☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did | d not |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | ■ Other. Specify Rent | |

| Ashley L. Hill | | Case number (if known) | | | | | | |
|--|---|------------------------|--|--|--|--|--|--|
| Populus Financial Group | Last 4 digits of account number 3587 | \$600.0 | | | | | | |
| Nonpriority Creditor's Name 14002 Triskett Rd. Cleveland. OH 44111 | When was the debt incurred? 2022 | | | | | | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you report as priority claims | ou did not | | | | | | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| Yes | Other. Specify Payday Loan | | | | | | | |
| Quest Diagnostics Nonpriority Creditor's Name | Last 4 digits of account number 3587 | \$472.50 | | | | | | |
| P.O. Box 740795 Cincinnati, OH 45274 | When was the debt incurred? 2022 | | | | | | | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | | | |
| Who incurred the debt? Check one. | | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | | |
| Check if this claim is for a community | ☐ Student loans | | | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that yor report as priority claims | ou did not | | | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| □ Yes | Other. Specify Medical | | | | | | | |
| Revenue Group | Last 4 digits of account number 3587 | \$5,162.70 | | | | | | |
| Nonpriority Creditor's Name | | | | | | | | |
| 3711 Chester Ave. | When was the debt incurred? 2021 | | | | | | | |
| Cleveland, OH 44114 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | | | | | | |
| Who incurred the debt? Check one. | , | | | | | | | |
| Debtor 1 only | ☐ Contingent | | | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | | |
| ☐ Check if this claim is for a community | Student loans | | | | | | | |
| debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that yo report as priority claims | ou did not | | | | | | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| ☐ Yes | ■ Other. Specify Medical | | | | | | | |

| Synchrony Bank/Paypal | Last 4 digits of account number | <u>3587</u> | \$2, |
|---|---|--|------|
| Nonpriority Creditor's Name P.O. Box 965005 Orlando, FL 32896 | When was the debt incurred? | 2022 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| Uprova Hambeco U | Last 4 digits of account number | 3587 | \$ |
| Nonpriority Creditor's Name 635 E. State Highway 20 Unit V Upper Lake, CA 95485 | When was the debt incurred? | 2023 | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Payday Loa | an | |
| West Park Dental | Last 4 digits of account number | 3587 | \$ |
| Nonpriority Creditor's Name 17001 Albers Ave. | When was the debt incurred? | 2021 | |
| Cleveland, OH 44111 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? — | report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Dental | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Debtor 1 Ashley L. Hill | | Case number (if known) | | | | |
|--|---|--|--|--|--|--|
| Client Services 3451 Harry Truman Blvd St. Charles, MO 63301 | Line 4.19 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| , | Last 4 digits of account number | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did | you list the original creditor? | | | | |
| Transworld Systems Inc | Line 4.15 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | |
| P.O. Box 15943 Wilmington, DE 19850-5943 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| 77mmigton, DE 10000-0040 | Last 4 digits of account number | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------------|-----|---|-----|-----------------|
| Total | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| claims from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 7,939.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 7,939.00 |
| | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 48,995.69 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 48,995.69 |

| Fill in this information to identify your case: | | | | | | |
|---|----------------|-------------------|-----------|--|---|---------------------|
| Debtor 1 | Ashley L. Hill | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF OHIO | | | |
| Case number | | | | | _ | 0 |
| (if known) | | | | | Ц | Check if this is an |
| | | | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with Name, Number, | whom you have the Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

| Debtor 1 Ashley L. Hill Pile Name Mode Name Lest Name | | | | | |
|--|---|---|---|--|--|
| Debtor 2 Spoule It filing First Name | Fill in this | s information to identify your | case: | | |
| Copose if, filing First Name Middle Name Last | Debtor 1 | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO Case number Check if this is an amended filing | D 1 4 0 | First Name | Middle Name | Last Name | |
| Case number Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married sopple are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, ill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D). Schedule E/F, or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fi out Column 2. Column 2: Your codebtor Name Name Street State State State State State Schedule D, line Schedule D, line Schedule G, line | | ing) First Name | Middle Name | Last Name | |
| Offficial Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married scopels are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, Ill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No you have any codebtors. (if you are filing a joint case, do not list either spouse as a codebtor. No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 105D), Schedule E/F, (Official Form 105E/F), or Schedule G (Official Form 105G). Use Schedule D, Schedule E/F, or Schedule G (Official Form 105G). Schedule E/F, line Schedule G, line Number Street Number Street Number Street | United Sta | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO | |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married beople are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, ill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor. No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No, Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106G)). Schedule E/F, Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule E/F, or Schedule G to fi out Column 2. Column 1: Your codebtor Name Column 5: Street Number Street Schedule D, line Schedule D, line Schedule G, line | | nber | | | |
| people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, illi tout, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor. No | | | lebtors | | 12/15 |
| No | people are fill it out, a your name | e filing together, both are equ and number the entries in the e and case number (if known | ally responsible for supper boxes on the left. Attach). Answer every question | olying correct informat the Additional Page t | tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write |
| 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) ■ No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fi out Column 2: Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Name Schedule D, line Number Street Number Street Number Street Number Schedule D, line Schedule G, line Schedule G, line | | you have any codebtors? (II | you are ming a joint case, t | do not list either spouse | as a codebior. |
| 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fi out Column 1: Your codebtor Name, Number, Street, City, State and ZIP Code Column 1: Your codebtor Name, Number, Street City State ZIP Code Schedule D, line Schedule G, line | | | | | |
| Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fit out Column 2: The creditor to whom you owe the debt Check all schedules that apply: Column 1: Your codebtor | | | | | |
| Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fi out Column 2: The creditor to whom you owe the debt Check all schedules that apply: Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Schedule | | | | | |
| in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fit out Column 2. Column 1: Your codebtor | | | use, or legal equivalent live | e with you at the time? | |
| Name, Number, Street, City, State and ZIP Code Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line | in line Form | e 2 again as a codebtor only 106D), Schedule E/F (Officia | if that person is a guaran | tor or cosigner. Make | sure you have listed the creditor on Schedule D (Official |
| Number Street City State ZIP Code Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule G, line Number Street | | | IP Code | | • |
| Number Street City State ZIP Code Schedule G, line Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line | 3.1 | Nama | | | |
| Schedule D, line Schedule E/F, line Schedule G, line Schedule | | Name | | | |
| Name Schedule E/F, line Schedule G, line Number Street | | | State | ZIP Code | _ |
| Name Schedule E/F, line Schedule G, line Number Street | 2.2 | | | | Cabadda D Bas |
| Number Street | 3.2 | Name | | | |
| | | | | | |
| | | | State | ZIP Code | _ |

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

| | in this information | | | | | | | | | | |
|-------------|---|--|--|----------------------------------|-----------|------|----------------|------------------------------|------------|----------------------------------|---------|
| De | btor 1 | Ashley L. Hi | II | | | | | | | | |
| | btor 2 buse, if filing) | | | | | | | | | | |
| Uni | ited States Bankrup | otcy Court for the | : NORTHERN DISTRIC | CT OF OHIO | | _ | | | | | |
| _ | se number | | | - | | | | eck if this is: An amende | d filing | | |
| | | | | | | | J | | | g postpetition ollowing date: | |
| <u>O</u> | fficial Form | <u> 1061</u> | | | | | | MM / DD/ Y | YYY | | |
| S | chedule I: | Your Inc | ome | | | | | | | | 12/15 |
| spo atta | use. If you are se ch a separate she | parated and you | are married and not filii r spouse is not filing wi On the top of any additi | ith you, do not inclu | ıde infor | mati | on abo | ut your spo | use. If mo | ore space is | needed, |
| 1. | Fill in your emp information. | loyment | | Debtor 1 | | | | Debtor 2 | or non-fil | ling spouse | |
| | | ore than one job, rate page with bout additional | Employment status | Employed | | | | ☐ Emplo | • | | |
| | information abou | | . , | ☐ Not employed | | | ☐ Not employed | | | | |
| | employers. | | Occupation | Letter Carrier | | | | | | | |
| | Include part-time self-employed wo | | Employer's name | USPS | | | | | | | |
| | Occupation may or homemaker, if | | Employer's address | 13901 State Rd North Royalton | | 133 | | | | | |
| | | | How long employed to | here? 16 yrs | | | | | | | |
| Pa | rt 2: Give De | etails About Mor | nthly Income | | | | | | | | |
| spoi | use unless you are | separated. spouse have mo | ore than one employer, cothis form. | | • | | · | | • | · | J |
| | | | | | | | For D | ebtor 1 | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (be calculate what the monthl | | 2. | \$ | | 6,757.27 | \$ | N/A | |
| 3. | Estimate and lis | st monthly overt | ime pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross | Income. Add lin | ne 2 + line 3. | | 4. | \$ | 6, | 757.27 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

| | ba. | rax, Medicare, and Social Security deductions | 5a. | \$ | 919.69 | \$ | N/A | |
|-----|---|--|-------------------|----------------|--------------------------------------|----------------------------|--------------------------|----------|
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 50.20 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 313.76 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 205.83 | \$ | N/A | |
| | 5e. | Insurance | 5e. | \$ | 643.96 | \$ | N/A | |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | - \$ | 0.00 | + \$ | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 2,133.44 | \$ | N/A | |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 4,623.83 | \$ | N/A | |
| 8. | 8b. 8c. 8d. 8e. 8f. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | 8c. 8d. 8e. | \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 | \$ \$ \$ \$ \$ | N/A N/A N/A N/A | |
| | 0 | Specify: | | \$_ \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | · - | 0.00 | | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$_ | 0.00 | + > | N/A | , |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. \$ | | 4,623.83 + \$ | 1 | N/A = \$ | 4,623.83 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | |
| 11. | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: | | | | | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certales | | | | , if it | | 4,623.83 |
| 13. | Do v | ou expect an increase or decrease within the year after you file this form | ı? | | | | Combine monthly | |
| - | - | No | | | | | | |

Official Form 106I Schedule I: Your Income page 2

Yes. Explain:

| | · · · · · · · · · · · · · · · · · · · | Cara ta Salara (Cara | | | | Ī | | |
|------------|--|---|-------------------------|--|---|----------------|-------------------|-------------------------------|
| FIII | in this informat | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | Ashley L. Hil | I | | | Che | ck if this is: | |
| | | | | | | | An amended filing | |
| l | otor 2 | | | | | | | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | IERN DISTRICT OF OHIC |) | | MM / DD / YYYY | |
| Cas | e number | | | | | | | |
| (If kı | nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your I | Eyner | 202 | | | | 12/15 |
| Be info | as complete a | and accurate as | possible. eded, atta | If two married people and the control of the contro | | | | or supplying correct |
| | | ibe Your House | hold | | | | | |
| 1. | Is this a join | it case? | | | | | | |
| | ■ No. Go to | line 2. | | | | | | |
| | ☐ Yes. Doe s | s Debtor 2 live i | n a separ | ate household? | | | | |
| | | 0 | | | | | | |
| | □ Ye | es. Debtor 2 mus | t file Offici | al Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of Deb | otor 2. | |
| 2. | Do vou have | e dependents? | □ No | | | | | |
| - | • | • | _ 100 | | Dan and antic valet | ! ! 4 - | Dan and dankla | Dana damandant |
| | Do not list De Debtor 2. | eptor 1 and | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents i | names. | | | Daughter | | 11 yrs | Yes |
| | | | | | | | | □ No |
| | | | | | Daugther | | 17 yrs | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses of yourself and | enses include f people other th d your depender | nts? ⊔ | No Yes | | | | |
| | | ate Your Ongoir | | · . | | | | |
| exp | | | | uptcy filing date unless y y is filed. If this is a supp | | | | |
| | | | | government assistance i | | | | |
| | ficial Form 10 | | | | our moome | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. Include first mortgag payments and any rent for the ground or lot. | | | | e 4. \$ | \$ | 1,443.80 | |
| | If not includ | ed in line 4: | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. S | \$ | 0.00 |
| | | rty, homeowner's | , or renter | 's insurance | | 4b. S | · | 0.00 |
| | 4c. Home | maintenance, re | pair, and ι | ıpkeep expenses | | 4c. S | \$ | 100.00 |
| | | owner's associati | | | | 4d. S | | 0.00 |
| 5. | Additional n | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. 9 | | 0.00 |

| Debtor 1 Ashley | L. Hill | Case num | nber (if known) | |
|--------------------|--|-----------------|---------------------------------------|--------------------------|
| . Utilities: | | | | |
| | y, heat, natural gas | 6a. | \$ | 225.00 |
| | ewer, garbage collection | 6b. | | 60.00 |
| | ne, cell phone, Internet, satellite, and cable services | 6c. | · : ——— | 250.00 |
| • | pecify: Internet | 6d. | · | 10.00 |
| Stream | | | \$ | 45.00 |
| | sekeeping supplies | | · · · · · · · · · · · · · · · · · · · | 750.00 |
| | children's education costs | 7. 8. | · | |
| | dry, and dry cleaning | 9. | · | 0.00 |
| | products and services | 9. 10. | · | 200.00 |
| | • | | · | 175.00 |
| . Medical and d | • | 11. | \$ | 200.00 |
| Do not include | n. Include gas, maintenance, bus or train fare. | 12. | \$ | 550.00 |
| | car payments. , clubs, recreation, newspapers, magazines, and books | 13. | · | 0.00 |
| | ntributions and religious donations | 14. | · | 0.00 |
| . Insurance. | idibations and rengious donations | 14. | Ψ | 0.00 |
| | insurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insu | | 15a. | \$ | 350.00 |
| 15b. Health in | | 15b. | · | 0.00 |
| 15c. Vehicle i | | 15c. | · | 180.00 |
| | surance. Specify: | 15d. | | 0.00 |
| | include taxes deducted from your pay or included in lines 4 or 20. | | ¥ | 0.00 |
| | cipated IRS payment | 16. | \$ | 150.00 |
| | lease payments: | | · | 130.00 |
| | nents for Vehicle 1 | 17a. | \$ | 0.00 |
| | nents for Vehicle 2 | 17b. | · | 0.00 |
| 17c. Other. Sp | | 17c. | * | 0.00 |
| 17d. Other. Sp | | —— 17d. 17d. | | 0.00 |
| | s of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| deducted from | n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| | ts you make to support others who do not live with you. | | \$ | 0.00 |
| Specify: | o you make to capport office the first fir | 19. | · | 0.00 |
| . , | perty expenses not included in lines 4 or 5 of this form or on Sch | | our Income. | |
| | es on other property | 20a. | | 0.00 |
| 20b. Real esta | • • • | 20b. | \$ | 0.00 |
| 20c. Property | , homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | ance, repair, and upkeep expenses | 20d. | · | 0.00 |
| | rner's association or condominium dues | 20e. | · - | 0.00 |
| . Other: Specify: | Pot Cumpling | | +\$ | 50.00 |
| | ret Supplies | | +\$ | 25.00 |
| Gym | Nice/Educational Expanses | | +\$ +\$ | 75.00 |
| School Supp | lies/Educational Expenses | | -ψ | /5.00 |
| . Calculate your | monthly expenses | | | |
| 22a. Add lines | | | \$ | 4,838.80 |
| 22b. Copy line | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | , |
| . , | 2a and 22b. The result is your monthly expenses. | | \$ | 4,838.80 |
| 220. Add III IG 2. | La and LLD. The result to your monthly expenses. | | | 4,030.00 |
| | monthly net income. | | | |
| 23a. Copy line | e 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,623.83 |
| 23b. Copy you | ur monthly expenses from line 22c above. | 23b. | -\$ | 4,838.80 |
| | | | - | |
| | your monthly expenses from your monthly income. | | • | 04 4 07 |
| The resu | It is your monthly net income. | 23c. | \$ | -214.97 |
| | | - | | |
| | an increase or decrease in your expenses within the year after y | | | ar daaraaa kaassa |
| | you expect to finish paying for your car loan within the year or do you expect you e terms of your mortgage? | ıı mortgage | payment to increase | or decrease because of a |
| _ | o torrio or your mortgago: | | | |
| ■ No. | [F. L. L. | | | |
| ☐ Yes. | Explain here: | | | |

| Fill in t | his information to identify you | ır case: | | | | | |
|------------|--|----------------------------|-------------------------------|-----------------------------|--|--|--|
| Debtor | | ii ouso. | | | | | |
| 200.0. | First Name | Middle Name | Last Name | | | | |
| Debtor : | | Middle Name | Last Name | | | | |
| (Spouse II | , ming) First Name | | | | | | |
| United S | States Bankruptcy Court for the: | NORTHERN DISTRIC | CT OF OHIO | | | | |
| Case no | umber | | | | | | |
| (if known) | | | | | heck if this is an mended filing | | |
| Officia | al Form 106Dec | | | | | | |
| Dec | laration About | an Individua | al Debtor's Sc | hedules | 12/15 | | |
| | Sign Below | | | | | | |
| Die | d you pay or agree to pay som | neone who is NOT an att | torney to help you fill out b | ankruptcy forms? | | | |
| | No | | | | | | |
| | Yes. Name of person | | | | ch Bankruptcy Petition Preparer's Notice, laration, and Signature (Official Form 119) | | |
| | der penalty of perjury, I declar t they are true and correct. | re that I have read the su | ımmary and schedules filed | d with this declaration and | | | |
| Х | /s/ Ashley L. Hill | | v | | | | |
| | | | Χ | | | | |
| | Ashley L. Hill Signature of Debtor 1 | | Signature of | Debtor 2 | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

| Fill | in this infor | nation to identify you | r case: | | | |
|---------|-------------------|---|--|---|---|---|
| Deb | tor 1 | Ashley L. Hill | M. 1 II N | | | |
| Deb | tor 2 | First Name | Middle Name | Last Name | | |
| | ise if, filing) | First Name | Middle Name | Last Name | | |
| Unit | ed States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF OHIO | | |
| | e number _ | | | | | |
| (if kno | own) | | | | _ | Check if this is an amended filing |
| ∩tt | icial Ec | rm 107 | | | | |
| | | rm 107 of Financial | Affairs for Individ | duals Filing for B | ankruntov | 04/22 |
| | | | | | | |
| infor | mation. If n | nore space is needed, | attach a separate sheet to | | equally responsible for sup y additional pages, write yo | |
| numl | ber (if know | n). Answer every ques | stion. | | | |
| Part | 1: Give I | Details About Your Ma | rital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital statu | ıs? | | | |
| | ☐ Married | | | | | |
| | ■ Not ma | rried | | | | |
| 2. | During the I | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| | _ | , | • | • | | |
| | ■ No □ Yes Lis | st all of the places you l | ived in the last 3 years. Do no | ot include where you live now | 1 | |
| | | st all of the places you i | · | · | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. | Within the la | ast 8 vears, did vou ev | ver live with a spouse or led | ual equivalent in a commun | ity property state or territor | v? (Community property |
| | | | | | ico, Texas, Washington and V | |
| | ■ No | | | | | |
| | _ | ake sure you fill out <i>Sch</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | |
| Part | 2 Evola | in the Sources of You | r Incomo | | | |
| Part | Ехріа | in the Sources of You | rincome | | | |
| | Fill in the tota | al amount of income yo | u received from all jobs and a | all businesses, including part- | | ndar years? |
| | _ | ng a joint case and you | have income that you receive | e togetner, list it only once ur | ider Deptor 1. | |
| | □ No | | | | | |
| | ■ Yes. Fil | I in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | • | of current year untiled for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$38,961.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| De | ebtor 1 As | hley L. Hill | | Cas | e number (if known) | |
|----|-----------------------------|--|--|--|--|---|
| | | | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | r last calen anuary 1 to | dar year: December 31, 2022 | ■ Wages, commissions, bonuses, tips | \$26,790.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | | dar year before tha December 31, 2021 | | \$17,988.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |
| | □ No | source and the gross | s income from each source separ | rately. Do not include income t | hat you listed in line 4. | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income (before deductions and exclusions) |
| | | / 1 of current year ເ iled for bankruptcy | | \$1,550.00 | | |
| | r last calen anuary 1 to | dar year: December 31, 2022 | Annuity | \$3,100.00 | | |
| | | dar year before tha December 31, 2021 | | \$3,100.00 | | |
| Pء | rt 3: List | Certain Payments | You Made Before You Filed for | r Bankruntov | | |
| _ | | | tor 2's debts primarily consum | • | | |
| 6. | □ No. | Neither Debtor 1 i | nor Debtor 2 has primarily constitutions for a personal, family, or househ | sumer debts. Consumer debt | s are defined in 11 U.S.C. § 10 | 01(8) as "incurred by an |
| | | During the 90 days | before you filed for bankruptcy, | did you pay any creditor a tota | I of \$7,575* or more? | |
| | | □ No. Go to I | line 7. | | | |
| | | paid th not inc | elow each creditor to whom you pa tat creditor. Do not include payme clude payments to an attorney for | ents for domestic support obligents this bankruptcy case. | ations, such as child support | and alimony. Also, do |
| | | * Subject to adjust | tment on 4/01/25 and every 3 year | ars after that for cases filed on | or after the date of adjustmen | t. |
| | Yes. | | or 2 or both have primarily constants before you filed for bankruptcy, | | I of \$600 or more? | |
| | | □ No. Go to I | line 7 | | | |
| | | _ | low each creditor to whom you page | aid a total of \$600 or more and | I the total amount you paid that | at creditor. Do not |

Creditor's Name and Address Total amount Dates of payment Amount you Was this payment for ... still owe paid

attorney for this bankruptcy case.

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Debtor 1

Official Form 107

Ashley L. Hill

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

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Official Form 107

Official Form 107

| | transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | |
|-----|---|---------|--|------------------|-------|---------|--|-------|---|
| | Person Who Received Transfer Address Person's relationship to you | | Description and property transfe | | | paym | ribe any property or nents received or debts in exchange | | Date transfer was made |
| | | | | | | | | | |
| 19. | Within 10 years before you filed for bankru beneficiary? (These are often called asset-pri | | | ny property to a | a sei | r-setti | ed trust or similar devic | е от | wnicn you are a |
| | Yes. Fill in the details. | | December and | | | | afauna d | | Data Transfer |
| | Name of trust | | Description and | value of the pro | oper | ty tran | sterred | | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, Ir | strun | nents, Safe Depos | it Boxes, and S | tora | ge Uni | its | | |
| 20. | Within 1 year before you filed for bankrupt | cy, we | ere any financial a | ccounts or inst | rum | ents h | eld in your name, or for | you | r benefit, closed, |
| | sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso | | | | | depos | it; shares in banks, cre | dit u | nions, brokerage |
| | No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | et 4 digits of count number | Type of acco | ount | or | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year | before you filed fo | or bankruptcy, a | ny s | afe de | eposit box or other depo | sito | ry for securities, |
| | No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, State and ZIP Code) | | De | scribe | the contents | | Do you still have it? |
| 22. | Have you stored property in a storage unit | or pla | ace other than you | ır home within | 1 yea | r befo | re you filed for bankrup | otcy? | ? |
| | No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | _ |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | Who else has or to it? Address (Number, State and ZIP Code) | | De | scribe | the contents | | Do you still have it? |
| Par | t 9: Identify Property You Hold or Contro | l for S | Someone Else | | | | | | |
| 23. | Do you hold or control any property that so for someone. | omeo | ne else owns? Inc | lude any prope | rty y | ou bo | rrowed from, are storing | g for | , or hold in trust |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, Code) | | De | scribe | the property | | Value |
| Par | t 10: Give Details About Environmental In | forma | , | | | | | | |
| For | the purpose of Part 10, the following definit | ions a | apply: | | | | | | |

page 5

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Ashley L. Hill

Official Form 107

regulations controlling the cleanup of these substances, wastes, or material.

Case number (if known)

| | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. | | | | | |
|-----|--|---|---|--------|---|--------------------|
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | |
| Rep | ort a | Ill notices, releases, and proceedings th | at you know about, regardless of whe | n the | ey occurred. | |
| 24. | Has | any governmental unit notified you tha | t you may be liable or potentially liable | e unc | der or in violation of an environme | ntal law? |
| | | No | | | | |
| | | Yes. Fill in the details. | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice |
| 25. | Hav | ve you notified any governmental unit of | any release of hazardous material? | | | |
| | | No Yes. Fill in the details. | | | | |
| | | me of site dress (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | nd | Environmental law, if you know it | Date of notice |
| 26. | Hav | ve you been a party in any judicial or adr | ministrative proceeding under any env | rironr | mental law? Include settlements a | nd orders. |
| | | No Yes. Fill in the details. | | | | |
| | | se Title se Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ture of the case | Status of the case |
| Par | t 11: | Give Details About Your Business or | Connections to Any Business | | | |
| 27. | Wit | hin 4 years before you filed for bankrup | tcy, did you own a business or have a | ny of | the following connections to any | business? |
| | | ☐ A sole proprietor or self-employed i | in a trade, profession, or other activity | , eith | er full-time or part-time | |
| | | ☐ A member of a limited liability comp | pany (LLC) or limited liability partnersh | nip (L | .LP) | |
| | | ☐ A partner in a partnership | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | |
| | | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | | | |
| | | No. None of the above applies. Go to I | Part 12. | | | |
| | | Yes. Check all that apply above and fill | I in the details below for each busines | s. | | |
| | | siness Name dress | Describe the nature of the business | | Employer Identification number Do not include Social Security | |
| | | mber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Dates business existed | iumber of frint. |
| 28. | | hin 2 years before you filed for bankrup titutions, creditors, or other parties. | tcy, did you give a financial statement | to ar | nyone about your business? Inclu | de all financial |
| | | No Yes. Fill in the details below. | | | | |
| | Ad | me dress mber, Street, City, State and ZIP Code) | Date Issued | | | |
| Par | t 12: | Sign Below | | | | |

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page 6

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Debtor 1 Ashley L. H | ill | Case number (if known) |
|---|--|--|
| | | |
| with a bankruptcy case 18 U.S.C. §§ 152, 1341, 1 | | prisonment for up to 20 years, or both. |
| /s/ Ashley L. Hill | | |
| Ashley L. Hill | Signa | ature of Debtor 2 |
| Signature of Debtor 1 | | |
| Date June 26, 2023 | Date | |
| Did you attach additiona | I pages to Your Statement of Financial | Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| No | | |
| ☐ Yes | | |
| Did you pay or agree to | pay someone who is not an attorney to | help you fill out bankruptcy forms? |
| No | | |
| □ Ves Name of Person | Attach the Rankruntcy Petition Pr | anarar's Notice Declaration and Signature (Official Form 110) |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Debtor 1 | Ashley L. Hill | | | |
|-----------------------------------|---|-----------------------|--|---|
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF OHIO | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official Fo | rm 100 | | | |
| | | n for Indiv | viduals Filing Under Chapt | or 7 |
| Statemen | it of intentio | ii ioi iiiaiv | nduals Filling Officer Chapt | E |
| If you are an ind | ividual filing under cha | pter 7, you must fil | ll out this form if: | |
| | e claims secured by yo | | | |
| You must file thi | ever is earlier, unless th | vithin 30 days after | ot expired. you file your bankruptcy petition or by the date s e time for cause. You must also send copies to the | |
| | eople are filing togethe nd date the form. | r in a joint case, bo | oth are equally responsible for supplying correct i | information. Both debtors must |
| | and accurate as possib our name and case nui | | s needed, attach a separate sheet to this form. Or | the top of any additional pages, |
| Part 1: List Yo | our Creditors Who Hav | e Secured Claims | | |
| 1. For any credit information be | | art 1 of Schedule D | e: Creditors Who Have Claims Secured by Propert | ey (Official Form 106D), fill in the |
| Identify the cr | editor and the property t | hat is collateral | What do you intend to do with the property that secures a debt? | t Did you claim the property as exempt on Schedule C? |
| | | | | |
| Creditor's R | Rocket Mortgage | | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of | 21270 Ellen Dr. Fai | irview Park. | Retain the property and enter into a Reaffirmation Agreement. | Yes |
| property | OH 44126 Cuyaho | oga County | Retain the property and [explain]: | |
| securing debt: | PPN: 331-19-034 | · C | The debtor will retain the collateral and continue to make monthly payments | |
| Part 2: List Yo | our Unexpired Persona | al Property I eases | | |
| For any unexpire | ed personal property le | ase that you listed | in Schedule G: Executory Contracts and Unexpired | |
| | | | nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p) | |
| Describe your u | inexpired personal pro | perty leases | | Will the lease be assumed? |
| Lessor's name: | | | | □ No |
| Description of lea Property: | ased | | | ☐ Yes |
| Loccor's name: | | | | |
| Lessor's name: Description of lea | ased | | | □ No |
| Property: | | | | ☐ Yes |
| Official Form 108 | | Statement of Ir | ntention for Individuals Filing Under Chapter 7 | page 1 |

| Debtor 1 Ashl | ley L. Hill | Case number (if known) | |
|--------------------------------------|---|---|------------------------------|
| | | | |
| Lessor's name: Description of lea | hases | 1 | □ No |
| Property: | 2500 | ו | ☐ Yes |
| Lessor's name: | and. |] | □ No |
| Description of lea Property: | aseu | 1 | □ Yes |
| Lessor's name: Description of lea | based |] | □ No |
| Property: | aseu | ו | ☐ Yes |
| Lessor's name: Description of lea | aned |] | □ No |
| Property: | aseu | 1 | ☐ Yes |
| Lessor's name: | | 1 | □ No |
| Description of lea Property: | aseu | 1 | ☐ Yes |
| Part 3: Sign E | 3elow | | |
| | perjury, I declare that I have indicated my intention about the subject to an unexpired lease. | out any property of my estate that secu | ures a debt and any personal |
| X /s/ Ashley | | (| |
| Ashley L. Signature o | | Signature of Debtor 2 | |
| Signature 0 | i Debitoi I | | |
| Date J | une 26, 2023 | Date | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

| Fill in | this information to identify your case: | | Ch | eck or | ne hox only as d | irected in this form and | d in Form |
|------------------------|---|--|---|--------------------------|---------------------------|--|-----------------------------------|
| Debte | | | | 2A-1S | | | 2 111 1 01111 |
| Debte | | | | ■ 1. ⁻ | There is no pres | umption of abuse | |
| `' | d States Bankruptcy Court for the: Northern District of | f Ohio | | □ 2. ⁻ | The calculation t | o determine if a presu | mption of abuse |
| Office | d States Bankruptcy Court for the. Northern District of | Offic | | | | nade under <i>Chapter 7</i> cial Form 122A-2). | Means Test |
| Case (if know | number | | | _ | ` | , | and the set |
| | <u></u> | | | | | does not apply now be service but it could ap | |
| | | | | □ Cł | neck if this is a | n amended filing | |
| <u>Offi</u> | <u>cial Form 122A - 1</u> | | | | | | |
| Cha | apter 7 Statement of Your Cur | rent Mo | nthly Inc | om | e | | 12/19 |
| attach case n | complete and accurate as possible. If two married people a a separate sheet to this form. Include the line number to w umber (if known). If you believe that you are exempted fror ring military service, complete and file Statement of Exemp Calculate Your Current Monthly Income | hich the addition | onal information on of abuse becau | applies | s. On the top of an | ny additional pages, wri narily consumer debts o | te your name and or because of |
| 1. | What is your marital and filing status? Check one on | ly. | | | | | |
| | ■ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | ☐ Married and your spouse is filing with you. Fill ou | t both Column | s A and B, lines | 2-11. | | | |
| | ☐ Married and your spouse is NOT filing with you. | • | • | | | | |
| | Living in the same household and are not lega | - | | | | | |
| | ☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evading | egally separate | ed under nonbar | nkrupto | cy law that applie | es or that you and you | |
| 10 ⁻ the | I in the average monthly income that you received from all statements of 1(10A). For example, if you are filing on September 15, the 6-miles of months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that property. | onth period woul by 6. Fill in the re | ld be March 1 thro esult. Do not inclu | ugh Au de any | gust 31. If the amoint me | ount of your monthly incor ore than once. For examp | ne varied during ble, if both |
| | | | | Colui Debt | mn A or 1 | Column B Debtor 2 or non-filing spouse | |
| | Your gross wages, salary, tips, bonuses, overtime, a payroll deductions). | and commissi | ions (before all | \$ | 6,003.00 | \$ | |
| | Alimony and maintenance payments. Do not include Column B is filled in. | payments from | n a spouse if | \$ | 0.00 | \$ | |
| | All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3. | Include regula I, your depende | ar contributions ents, parents, | \$ | 0.00 | \$ | |
| 5. | Net income from operating a business, profession, | | | | | | |
| | | | btor 1 | | | | |
| İ | Gross receipts (before all deductions) | \$ <u>0.00</u> -\$ <u>0.00</u> | _ | | | | |
| | Ordinary and necessary operating expenses Net monthly income from a business, profession, or farr | · — | Copy here -> | . \$ | 0.00 | \$ | |
| | Net income from rental and other real property | Ψ | _ ', | · — | | | |
| | | De | btor 1 | | | | |
| | Gross receipts (before all deductions) | \$ 0.00 | _ | | | | |
| | Ordinary and necessary operating expenses | -\$ 0.00 | _ | _ | | • | |
| | Net monthly income from rental or other real property | \$0.00 | Copy here -> | | 0.00 | \$ | |
| 7 | Interest, dividends, and royalties | | | \$ | 0.00 | Ψ | |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

page 1

Official Form 122A-1

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Ashley L. Hill

Ashley L. Hill

Signature of Debtor 1

Chapter 7 Statement of Your Current Monthly Income

page 2

| Debtor 1 | Ashley L. Hill | Case number (if known) |
|----------|----------------|------------------------|
|----------|----------------|------------------------|

Date June 26, 2023

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Debtor 1 Ashley L. Hill Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 12/01/2022 to 05/31/2023.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **USPS** Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$23,092.00 from check dated 11/30/2022. Ending Year-to-Date Income: \$26,790.00 from check dated 12/31/2022.

This Year:

Current Year-to-Date Income: \$32,320.00 from check dated 5/31/2023.

Income for six-month period (Current+(Ending-Starting)): \$36,018.00 .

Average Monthly Income: **\$6,003.00**.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$78 | administrative fee |
| + \$15 | trustee surcharge |
| \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

| In r | e Ashley L. Hill | | Case No. | | | | | |
|------|--|--|------------------------------------|--------------------------------------|------------|--|--|--|
| | | Debtor(s) | Chapter | 7 | | | | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTORM | NEY FOR DI | EBTOR(S) | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,085.00 | | | | |
| | Prior to the filing of this statement I have received | I | \$ | 1,085.00 | | | | |
| | Balance Due | | | 0.00 | | | | |
| 2. | The source of the compensation paid to me was: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 3. | The source of compensation to be paid to me is: | | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. | | | | | | | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects of | of the bankruptcy | case, including: | | | | |
| | a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications of liens on head of the secured creditors of head of the secured creditors. | atement of affairs and plan which me tors and confirmation hearing, and reduce to market value; exemples as needed; preparation at | nay be required; any adjourned hea | rings thereof; ; preparation and fil | ing of | | | |
| 6. | By agreement with the debtor(s), the above-disclosed f Representation of the debtors in any d any other adversary proceeding. | | | es, relief from stay | actions or | | | |
| | | CERTIFICATION | | | | | | |
| this | I certify that the foregoing is a complete statement of a bankruptcy proceeding. | ny agreement or arrangement for pa | ayment to me for i | representation of the de | btor(s) in | | | |
| | June 26, 2023 | /s/ Steven Emery | | | | | | |
| | Date | Steven Emery Signature of Attorney | | | | | | |
| | | Räuser & Associate | | | | | | |
| | | 1468 W. 9th St. #30 | - | | | | | |
| | | Cleveland, OH 4411 216-263-6200 Fax: | | | | | | |
| | | www.ohiolegalclini | | | | | | |
| | | Name of law firm | | | | | | |
| - | | | | | | | | |

United States Bankruptcy Court Northern District of Ohio

| In re | Ashley L. Hill | | Case No. | | |
|---------|-------------------------------------|---|-----------------------|-----------------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | VERII | FICATION OF CREDITOR | TOR MATRIX | | |
| The abo | ove-named Debtor hereby verifies th | at the attached list of creditors is true and | l correct to the best | of his/her knowledge. | |
| Date: | June 26, 2023 | /s/ Ashley L. Hill | | | |

Signature of Debtor

Affirm, Inc. 650 California St. Floor 12 San Francisco, CA 94108

Bridgecrest P.O. Box 29018 Phoenix, AZ 85038

Capital One Auto Finance P.O. Box 201347 Arlington, TX 76006

Capital One Bank USA NA P.O. Box 30293 Salt Lake City, UT 84131

City of Cleveland Division of Water P.O. Box 94540 Cleveland, OH 44101-4540

City of Cleveland Parking Violations P.O. Box 99939 Cleveland, OH 44199

City of East Cleveland Automated Traffic Control Violation Syst P.O. Box 22091 Tempe, AZ 85285

Client Services 3451 Harry Truman Blvd St. Charles, MO 63301

Comenity Bank/Express P.O. Box 182789 Columbus, OH 43218

Comenity Bank/Victoria's Secret P.O. Box 182789 Columbus, OH 43218

Discover Bank P.O. Box 30923 Salt Lake City, UT 84130

Dominion Energy P.O. Box 26785 Richmond, VA 23261-6785

First Premier Bank 3820 N. Louise Ave. Sioux Falls, SD 57107 IRS P.O. Box 7346 Philadelphia, PA 19101-7346

Midland Credit Management 350 Camino De La Reina Suite 100 San Diego, CA 92108

National Credit Adjusters 327 West 4th Street P.O. Box 3023 Hutchinson, KS 67504

Northern View Villas Apartments 4877 Columbia Rd # 50 North Olmsted, OH 44070

Populus Financial Group 14002 Triskett Rd. Cleveland, OH 44111

Quest Diagnostics P.O. Box 740795 Cincinnati, OH 45274

Revenue Group 3711 Chester Ave. Cleveland, OH 44114

Rocket Mortgage 1050 Woodward Ave. Detroit, MI 48226

Synchrony Bank/Paypal P.O. Box 965005 Orlando, FL 32896

Transworld Systems Inc P.O. Box 15943 Wilmington, DE 19850-5943

Uprova Hambeco U 635 E. State Highway 20 Unit V Upper Lake, CA 95485

West Park Dental 17001 Albers Ave. Cleveland, OH 44111